



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. 3364466

INTERSTATE ☐ CITY STREET ☐  
STATE ROUTE ☒ OTHER ☐  
COUNTY RD ☐ PRIVATE WAY ☐  
FIRE RESULTED ☐  
STOLEN VEHICLE ☐  
HIT & RUN INVOLVED ☒

TRIBAL RESERVATION

CASE # 13-02950  
LOCAL AGENCY CODING

TOTAL # OF UNITS 01 OBJECT STRUCK BUSHES

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #  
DATE OF COLLISION 11-21-2013 31 0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☐  
SR 204 BLOCK NO. 9200

DISTANCE 100 MILES ☐ N ☐ E ☒ S ☐ W OF (REFERENCE OR CROSS STREET) 91ST AVE NE

UNIT 01 MOTOR VEHICLE ☒ PEDAL CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

LAST NAME UNKNOWN FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL ENDORSEMENTS RESTRICTIONS

DRIVER'S LICENSE # STATE SEX D.O.B. MMDDYYYY

ON DUTY ☐ STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

LICENSE PLATE # AMB4611 STATE WA VIN# 1FA0P3K2XDL271705

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR 2013 MAKE FORD MODEL FOCUS STYLE 4DR VEHICLE TOWED YES ☒ NO ☐ TOWED BY ANGEL TOWING GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO. NAME SAGHY, JONATHAN C 5/10/77

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # UNKNOWN CITATION # CHARGE

UNIT 02 MOTOR VEHICLE ☐ PEDAL CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☐ NO ☐ PHONE

LAST NAME FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL ENDORSEMENTS RESTRICTIONS

DRIVER'S LICENSE # STATE SEX D.O.B. MMDDYYYY

ON DUTY ☐ STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

LICENSE PLATE # STATE VIN#

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED YES ☐ NO ☐ TOWED BY GOVT. VEHICLE YES ☐ NO ☐

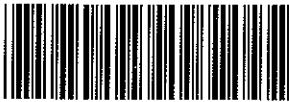
REGISTERED OWNER INFO. NAME HINGGEN

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # CITATION # CHARGE

OFFICER'S NAME (PRINT) M. HINGGEN BADGE OR ID # 126 AGENCY LSPD



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION ☐

REPORT NO. 3364466

CASE # 13-02950

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) JENNINGS, JAMES

ADDRESS & PHONE # 15169 25TH AVE SE 425-622-5403 SEX M D.O.B. MMDDYYYY 09-20-1987

PASSENGER ☐ WITNESS ☒ UNIT # SEAT POS AIRBAG RESTR EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL) MOSELEY, DARIAN

ADDRESS & PHONE # 2316 124TH AVE NE 425-374-3404 SEX F D.O.B. MMDDYYYY 11-02-1993

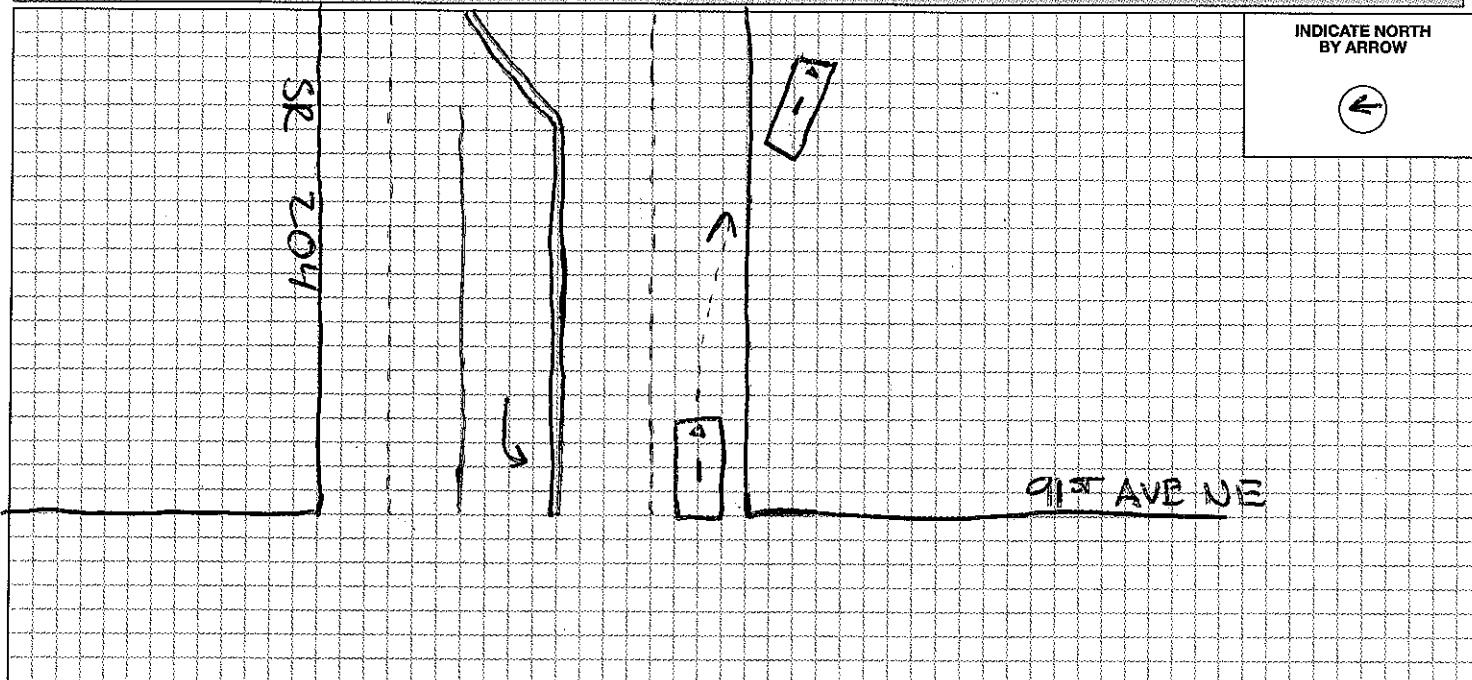
PASSENGER ☐ WITNESS ☐ UNIT # SEAT POS AIRBAG RESTR EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE # SEX D.O.B. MMDDYYYY

PASSENGER ☐ WITNESS ☐ UNIT # SEAT POS AIRBAG RESTR EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

DIAGRAM



NARRATIVE

VEH #1 WAS TRAVELING EAST ON SR 204 VEH #1 VEERED RIGHT AND EXITED THE ROADWAY INTO BUSHES THE VEH DROPPED APPROX 5 FT DOWN AN EMBANKMENT. THE DRIVER LEFT THE VEHICLE AND WALKED AWAY. THE DRIVER WAS NOT LOCATED.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

INVESTIGATING OFFICER'S SIGNATURE 1136 11/22/13 LAKE STEVENS, WA

APPROVED BY DATE 11-27-13

BADGE OR ID # 126 ORI # 031001900 TIME POLICE DISPATCHED 2246 TIME POLICE ARRIVED 2248

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02950


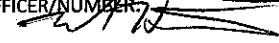
### VICTIM / WITNESS

|                                     |   |   |          |          |   |              |             |            |           |           |
|-------------------------------------|---|---|----------|----------|---|--------------|-------------|------------|-----------|-----------|
| NON-DISC <input type="checkbox"/>   | NAME (LAST, FIRST MIDDLE)<br>Moseley Darian | RACE<br>W                               | ETH<br>U | SEX<br>F | DOB<br>11-02-93                                   | AGE<br>20    | HGT<br>5'9" | WGT<br>240 | HAIR<br>B | EYES<br>B |
| STREET ADDRESS<br>2816 124th Ave NE |   | CITY<br>Lake Stevens                    |          |          | STATE<br>WA                                       | ZIP<br>98258 | RES. STATUS |            |           |           |
| HOME PHONE<br>425-374-3404          |   | CELL PHONE                              |          |          | PLACE OF EMPLOYMENT<br>Taco Time Frontier Village |              |             |            |           |           |
| WORK PHONE                          |   | EMAIL ADDRESS<br>darian.disen@yahoo.com |          |          |   |              |             |            |           |           |

I, Darian Moseley, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was at Walgreens and heard a whining sound looked over towards 7-11 and saw a car shoot into the bushes. He was in shock. Then walked away fast. He said he was ok. but wasn't. He was going too fast on a straight away to have veered that much. White male, 5'9-5'10 dirty blonde hair mid-late 20's. Heavy set.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

|  |                         |                                     |
|--|-------------------------|-------------------------------------|
| SIGNATURE:<br>          | DATE SIGNED<br>11-21-13 | LOCATION SIGNED<br>Frontier Village |
| OFFICER/NUMBER:<br> 126 | DATE SIGNED<br>11/22/13 | LOCATION SIGNED<br>LAKB STRVBZ123   |

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02950

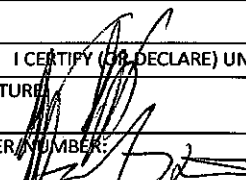
### VICTIM / WITNESS

|                                    |   |   |          |          |   |           |              |            |             |            |
|------------------------------------|---|---|----------|----------|---|-----------|--------------|------------|-------------|------------|
| NON-DISC <input type="checkbox"/>  | NAME (LAST, FIRST MIDDLE)<br>Jennings James | RACE<br>W                                   | ETH<br>W | SEX<br>M | DOB<br>9-20-87                            | AGE<br>26 | HGT<br>6'2"  | WGT<br>175 | HAIR<br>BL  | EYES<br>BZ |
| STREET ADDRESS<br>15109 257 Ave SE |   | CITY<br>Monroe                              |          |          | STATE<br>WA                               |           | ZIP<br>98272 |            | RES. STATUS |            |
| HOME PHONE                         |   | CELL PHONE<br>425-622-5403                  |          |          | PLACE OF EMPLOYMENT<br>Santana Excavation |           |              |            |             |            |
| WORK PHONE                         |   | EMAIL ADDRESS<br>jimbo.jennings19@yahoo.com |          |          |   |           |              |            |             |            |

I, James Jennings, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was at walgreens, I heard tires skidding on the pavement looked over and saw a smoke coming from the bushes when we went to see what it was there was a newer ford hatchback car in the ditch. we asked the driver if he was ok. he said yes then quickly fled the scene (fast walk) for some reason unknown to me

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

|  |                         |                                  |
|--|-------------------------|----------------------------------|
| SIGNATURE<br> | DATE SIGNED<br>11-26-13 | LOCATION SIGNED<br>Hwy-9 SR 204  |
| OFFICER NUMBER<br>126  | DATE SIGNED<br>11/22/13 | LOCATION SIGNED<br>CHAKA STEVENS |

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

## CHECK ALL THAT APPLY:

## UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

13-02950

TOW / IMPOUND  
AND INVENTORY RECORD

- ☐ NON-IMPOUND / TOW  
☐ AAA or OTHER ROADSIDE ASSISTANCE  
☐ EVIDENCE  
☐ SEIZED UNDER RCW 69.50.505  
☒ IMPOUND ONLY  
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD  
☐ DWLS IMPOUND WITH \_\_\_\_\_ DAY HOLD

- ☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.  
☐ REGISTERED OWNER MAY REDEEM \_\_\_\_\_

- ☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

- ☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

## VEHICLE INFORMATION

VIN

1 F A O P 3 K 2 X O L 2 7 1 7 0 5

LICENSE

AMB4611

STATE

WA

YEAR

13

MAKE

FORD

MODEL

FOCUS

MILEAGE

☐ Report of Sale

☐ Digital

STYLE

4 PR

COLOR

SLU

## DRIVER

NAME (LAST, FIRST, MI)

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

DOB

## REGISTERED OWNER

NAME (LAST, FIRST, MI)

HARSAGHY, JONATHAN C

STREET ADDRESS

8307 1ST ST SR

CITY, STATE, ZIP CODE

LAKE STEVENS, WA 98258

PHONE

## LEGAL OWNER

NAME (LAST, FIRST, MI)

SANTANDER CONSUMER

STREET ADDRESS

PO Box 25120

CITY, STATE, ZIP CODE

LEHIGH VALLEY, PA 18002

PHONE

## AUTHORIZATION AND RECEIPT

ON THIS DATE OF 11/21/13 AT 2316 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE ANGEL TOWING (TOWING FIRM)

TO REMOVE THIS VEHICLE FROM 9200 SR 204

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

DOL TOW TRUCK NO.

SDH 07

DATE

11-21-13

## EQUIPMENT

## DAMAGE

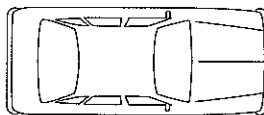
## EVIDENCE (DRIVER'S SIDE)

## EVIDENCE (PASSENGER'S SIDE)

- ☐ GLOVE BOX LOCKED  
☐ KEYS [ ]  
☐ AUTO STEREO  
☐ AUDIO TAPES / CD'S [ ]  
☐ CB RADIO  
☐ RADAR DETECTOR  
☐ TRUNK LOCKED  
☐ SPARE TIRE  
☐ JACK  
☐ CHAINS  
☐ OTHER \_\_\_\_\_

- ☐ FRONT  
☐ R FRONT  
☐ R SIDE  
☐ R REAR  
☐ L FRONT  
☐ L SIDE  
☐ L REAR  
☐ REAR  
☐ TOP  
☐ UNDERCARRIAGE  
☐ OTHER \_\_\_\_\_

SHADE DAMAGED AREA



## INVENTORY/EVIDENCE

## NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

ABANDONED VEHICLE  
SINGLE VEH COLLISION

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

SDH 07

BADGE NO.

126

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

LSPD  
ORIGINAL

CHECK ALL THAT APPLY:

## UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

13-02950

TOW / IMPOUND  
AND INVENTORY RECORD

- ☐ NON-IMPOUND / TOW  
☐ AAA or OTHER ROADSIDE ASSISTANCE  
☐ EVIDENCE  
☐ SEIZED UNDER RCW 69.50.505  
☒ IMPOUND ONLY  
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD  
☐ DWLS IMPOUND WITH \_\_\_\_\_ DAY HOLD  
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.  
☐ REGISTERED OWNER MAY REDEEM \_\_\_\_\_  
☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.  
☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

## VEHICLE INFORMATION

|  |             |   |              |                               |
|--|-------------|---|--------------|-------------------------------|
| VIN<br>1 F A O P 3 K Z X D L 2 7 1 7 0 5 |             |   |              |                               |
| LICENSE<br>AMB4611                       | STATE<br>WA | YEAR<br>13                                  | MAKE<br>FORD | MODEL<br>FOCUS                |
| <input type="checkbox"/> Report of Sale  |             | MILEAGE<br><input type="checkbox"/> Digital |              | STYLE<br>4 PR<br>COLOR<br>SLU |

## DRIVER

## REGISTERED OWNER

## LEGAL OWNER

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| NAME (LAST, FIRST, MI)<br>STREET ADDRESS<br>CITY, STATE, ZIP CODE<br>PHONE |  | NAME (LAST, FIRST, MI)<br>STREET ADDRESS<br>CITY, STATE, ZIP CODE<br>PHONE |  | NAME (LAST, FIRST, MI)<br>STREET ADDRESS<br>CITY, STATE, ZIP CODE<br>PHONE |  |
|  |  | DOB<br>HARSAGHY, JONATHAN C<br>8307 1ST ST SR<br>LAKE STEVENS, WA 98258    |  | SANTANDER CONSUMERS<br>PO Box 25120<br>LEHIGH VALLEY, PA 18002             |  |

## AUTHORIZATION AND RECEIPT

ON THIS DATE OF 11/11/13 AT 2316 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE ANGEL TOWING

TO REMOVE THIS VEHICLE FROM 9200 SR 204 (TOWING FIRM)

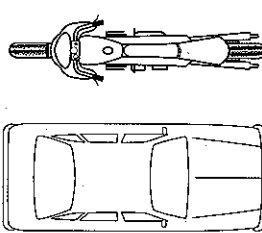
I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

DOL TOW TRUCK NO.

DATE

50407 11-21-13

| EQUIPMENT   | DAMAGE  | EVIDENCE (DRIVER'S SIDE) | EVIDENCE (PASSENGER'S SIDE) |
|---|---|--------------------------|-----------------------------|
| <input type="checkbox"/> GLOVE BOX LOCKED<br><input type="checkbox"/> KEYS [ ]<br><input type="checkbox"/> AUTO STEREO<br><input type="checkbox"/> AUDIO TAPES / CD'S [ ]<br><input type="checkbox"/> CB RADIO<br><input type="checkbox"/> RADAR DETECTOR<br><input type="checkbox"/> TRUNK LOCKED<br><input type="checkbox"/> SPARE TIRE<br><input type="checkbox"/> JACK<br><input type="checkbox"/> CHAINS<br><input type="checkbox"/> OTHER _____ | <input type="checkbox"/> FRONT<br><input type="checkbox"/> R FRONT<br><input type="checkbox"/> R SIDE<br><input type="checkbox"/> R REAR<br><input type="checkbox"/> L FRONT<br><input type="checkbox"/> L SIDE<br><input type="checkbox"/> L REAR<br><input type="checkbox"/> REAR<br><input type="checkbox"/> TOP<br><input type="checkbox"/> UNDERCARRIAGE<br><input type="checkbox"/> OTHER _____ |                          |                             |
|   |    |                          |                             |

## INVENTORY/EVIDENCE

## NARRATIVE OR DIAGRAM

|  |
|--|
| INVENTORY/EVIDENCE<br>NARRATIVE OR DIAGRAM<br>(List reason(s) for impound.)<br>ABANDONED VEHICLE<br>SINGLE VEH COLLISION |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

X

50407134  
COUNTY, WA

BADGE NO.

126

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

**LSPD  
ORIGINAL**

/2355  
/2358  
/2358

ONSCNE SS1942  
CLEAR SS1942 D/H  
CLOSE SS1942

LSPD  
ORIGINAL